	FICATE OF INSURANCE	——————————————————————————————————————	-		ISSUE DA 7/6/202	
ADMINISTRATOR Southwest Risk Services 14902 North 73rd Street Scottsdale, AZ 85260 (602) 996-8810		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OF ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.				
		COMPANIES AFFORDING COVERAGE				
		COMPANY LETTER A A	ARIZONA MUNICIPAL	RISK RETENTION P	OOL	
INSURED Goodyear 190 N Litchfield Rd		COMPANY LETTER B				***************************************
		COMPANY LETTER C				
Goodyear, Arizona 85338		COMPANY LETTER D				
RESPE SUBJE	D INDICATED, NOT WITHSTANDING AN ECT TO WHICH THIS CERTIFICATE MAY CT TO ALL THE TERMS, EXCLUSIONS,	BE ISSUED OR F	PERTAIN, THE INSUR S OF SUCH POLICIES	ANCE AFFORDED E S.	ACT OR OTHER DOCUMENT BY THE POLICES DESCRIBED	WITH HERE IN IS
CO TR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE	LIMITS	
Х	ENERAL LIABILITY COMMERCIAL GENERAL LIABILITY X CLAIMS MADE	2000115-4	7/1/2020		EACH WRONGFUL ACT PROD COMP/OPS AGGR	
	OCCURRENCE		77112020	7/1/2021	GENERAL AGGREGATE PERSONAL & ADV INJURY FIRE DAMAGE(1 FIRE) MEDICAL EXP(1 PERSON)	\$2,000,00 \$2,000,00 \$6,000,00 \$2,000,00 \$300,00 \$5,00
A AL	OCCURRENCE UTOMOBILE LIABILITY ANY AUTO	2000115-4	7/1/2020	7/1/2021	PERSONAL & ADV INJURY FIRE DAMAGE(1 FIRE)	\$2,000,00 \$6,000,00 \$2,000,00 \$300,00

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

ISSUED FOR INSURANCE IDENTIFICATION PURPOSES TO BE DISPLAYED TO ANY LAW ENFORCEMENT OFFICER UPON REQUEST.

2000116-4

2000290-1

2000115-4

CERTIFICATE HOLDER

OTHER

Α

CANCELLATION

7/1/2020

7/1/2020

7/1/2020

FOR AUTOMOBILE IDENTIFICATION

WORKERS, COMPENSATION AND

EMPLOYERS, LIABILITY

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED SIGNATURE

Elval a Barrel

AGGREGATE

(EACH ACCIDENT)

(DISEASE-POL LMT)

(DISEASE-EACH EMP)

7/1/2021

7/1/2021

7/1/2021

\$13,000,000

STATUTORY

\$1,000,000

\$1,000,000

\$1,000,000